

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of

Atty Dkt. 3652-44

C# M#

Murphy et al.

TC/A.U.

1625

Serial No. 10/722,542

Examiner: Amelia A. Owens

Filed: November 18, 2003

Date: December 6, 2004

Title: MITOCHONDRIALLY TARGETED ANTIOXIDANTS

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

RESPONSE/AMENDMENT/LETTER

This is a response/amendment/letter in the above-identified application and includes an attachment which is hereby incorporated by reference and the signature below serves as the signature to the attachment in the absence of any other signature thereon.

☐ **Correspondence Address Indication Form Attached.****Fees are attached as calculated below:**

Total effective claims after amendment 24 minus highest number
previously paid for 24 (at least 20) = 0 x \$ 18.00 \$ 0.00

Independent claims after amendment 1 minus highest number
previously paid for 3 (at least 3) = 0 x \$ 88.00 \$ 0.00

If proper multiple dependent claims now added for first time, add \$300.00 (ignore improper) \$ 0.00

Petition is hereby made to extend the current due date so as to cover the filing date of this
paper and attachment(s) (\$110.00/1 month; \$430.00/2 months; \$980.00/3 months) \$ 110.00

Terminal disclaimer enclosed, add \$ 110.00 \$ 0.00

☐ First/second submission after Final Rejection pursuant to 37 CFR 1.129(a) (\$790.00) \$ 0.00

☐ Please enter the previously unentered, filed

☐ Submission attached

Subtotal \$ 110.00

If "small entity," then enter half (1/2) of subtotal and subtract -\$ 0.00

☐ Applicant claims "small entity" status. ☐ Statement filed herewith

Rule 56 Information Disclosure Statement Filing Fee (\$180.00) \$ 0.00

Assignment Recording Fee (\$40.00) \$ 0.00

Other: Notice of Appeal 340.00

TOTAL FEE ENCLOSED \$ 450.00

The Commissioner is hereby authorized to charge any deficiency, or credit any overpayment, in the fee(s) filed, or asserted to be filed, or which should have been filed herewith (or with any paper hereafter filed in this application by this firm) to our Account No. 14-1140. A duplicate copy of this sheet is attached.

1100 North Glebe Road, 8th Floor
Arlington, Virginia 22201-4714
Telephone: (703) 816-4000
Facsimile: (703) 816-4100
LCM:lrm

NIXON & VANDERHYE P.C.
By Atty: Leonard C. Mitchard, Reg. No. 29,009

Signature: 

12/07/2004 SSITHIB1 00000022 10722542

01 FC:1251
02 FC:1401

110.00 OP
340.00 OP

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE
Before the Board of Patent Appeals and Interferences

In re Patent Application of

Murphy et al.

Serial No. 10/722,542

Filed: November 18, 2003

Title: MITOCHONDRIALLY TARGETED ANTIOXIDANTS

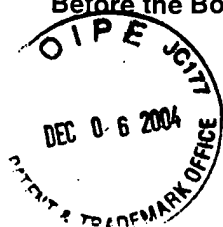
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Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

☐ Correspondence Address Indication Form Attached.

☒ **NOTICE OF APPEAL**

Applicant hereby **appeals** to the Board of Patent Appeals and Interferences from the last decision of the Examiner twice/finally rejecting applicant's claim(s). (\$ 340.00) \$ 340.00

☐ An appeal **BRIEF** is attached in the pending appeal of the above-identified application (\$ 340.00) \$

☐ Credit for fees paid in prior appeal without decision on merits -\$ ()

☐ A reply brief is attached in triplicate under Rule 41.41 (no fee)

☒ Petition is hereby made to extend the current due date so as to cover the filing date of this paper and attachment(s) (\$110.00/1 month; \$430.00/2 months; \$980.00/3 months; \$1530.00/4 months) \$ 110.00
SUBTOTAL \$ 450.00

☐ Applicant claims "Small entity" status, enter 1/2 of subtotal and subtract

☐ "Small entity" statement attached. \$-

SUBTOTAL \$ 450.00

Less month extension previously paid on \$-(0.00)

TOTAL FEE ENCLOSED \$ 450.00

Any future submission requiring an extension of time is hereby stated to include a petition for such time extension. The Commissioner is hereby authorized to charge any deficiency, or credit any overpayment, in the fee(s) filed, or asserted to be filed, or which should have been filed herewith (or with any paper hereafter filed in this application by this firm) to our **Account No. 14-1140**. A duplicate copy of this sheet is attached.

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Signature: _____